

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front.

I K. L. Byrd  
0 N. Ripley Street  
Montgomery, AL 36104-2722

*9/26 Order + and to conf.*  
2. Article Number  
(Transfer from service label)

2004

COMPLETE THIS SECTION ON DELIVERY  
FILED 09/29/2006

Page 1 of 1

## A. Signature

**X***Shelia Best* Agent Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

5. Is delivery address different from item 1?  
If YES, enter delivery address below: Yes No*601 828  
9/26 and to  
order C.O.D.*

## 3. Service Type

Certified Mail  
 Registered  
 Insured Mail

 Express Mail Return Receipt for Merchandise  
 C.O.D.

## 4. Restricted Delivery? (Extra Fee)

 Yes

7005 1820 0002 3461 6371

102595-02-M-1540

Domestic Return Receipt